

United States Bankruptcy Court for the District of Delaware**Fill in this information to identify the debtor**

- | | |
|--|---|
| <input type="checkbox"/> JOANN Inc. (Case No. 25-10068) | <input type="checkbox"/> JOANN Holdings 1, LLC (Case No. 25-10069) |
| <input type="checkbox"/> JOANN Holdings 2, LLC (Case No. 25-10070) | <input type="checkbox"/> Needle Holdings LLC (Case No. 25-10071) |
| <input type="checkbox"/> Jo-Ann Stores, LLC (Case No. 25-10072) | <input type="checkbox"/> Creative Tech Solutions LLC (Case No. 25-10073) |
| <input type="checkbox"/> Creativebug, LLC (Case No. 25-10074) | <input type="checkbox"/> WeaveUp, Inc. (Case No. 25-10075) |
| <input type="checkbox"/> JAS Aviation, LLC (Case No. 25-10076) | <input type="checkbox"/> joann.com, LLC (Case No. 25-10077) |
| <input type="checkbox"/> JOANN Ditto Holdings Inc. (Case No. 25-10078) | <input type="checkbox"/> Jo-Ann Stores Support Center, Inc. (Case No. 25-10079) |
| <input type="checkbox"/> Dittopatterns LLC (Case No. 25-10080) | |

Claim Withdrawal Form**Part 1: Identify the Claim****Creditor Name and Address:**

Name _____

Address _____

City _____

State _____

Zip Code _____

Contact Phone: _____

Contact Email: _____

Claim Number (if known): _____**Date Claim Filed:** _____

(mm/dd/yyyy)

Total Amount of Claim Filed:

\$ _____

Part 2: Sign Below**The person completing this form must sign and date it.**

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Clerk of this Court, or their duly appointed Claims Agent, to reflect this withdrawal on the official claims register for the above referenced Debtor.

Executed on date _____
(mm/dd/yyyy)

Signature _____

Print Name _____

Title (if applicable) _____

DEFINITIONS

Debtor: The person, corporation, or other entity that has filed a bankruptcy case is called the debtor.

Creditor: A creditor is any person, corporation, or other entity to which the debtor owed a debt.

Proof of Claim: A form filed with the clerk of the bankruptcy court where the bankruptcy case was filed, to tell the bankruptcy court how much the debtor owed a creditor (the amount of the creditor's claim).

Completed claim withdrawal forms can be sent to the following address:

JOANN Inc. (2025) Claims Processing Center
c/o Kroll Restructuring Administration LLC
850 Third Avenue, Suite 412
Brooklyn, NY 11232

Or by email to:**Joann2025Info@ra.kroll.com**